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Longbenton Urban District Council.

COUNTY OF NORTHUMBERLAND.

CXXO.

Annual Reports

FOR THE YEAR

1936

OF

Dr. THEODORE CRAIG,

M.B., Ch.B., F.R.S.M.E., Medical Officer of Health;

WILLIAM N. LOCKEY,

M.R.San.I., Certified Meat Inspector,

Sanitary Inspector;

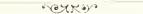
AND

HEALTH VISITORS.



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AND

HEALTH VISITORS.

STAFF OF HEALTH DEPARTMENT.

OFFICE.	Officer.	QUALIFICATIONS.	WHOLE OR PART TIME.
Medical Officer of Health, Medical Officer Child Welfare and Ante Natal Centres	THEODORE CRAIG	M.B., Ch.B. (Edin.), F.R.S.M.E.	Part
Deputy Medical Officer of Health	Louisa B. Harper	M.B., Ch.B. (Edin).	Part
Sanitary Inspector, Housing Inspector, Meat and Food Inspector, Shops' Inspector and Petroleum Inspector	William N. Lockey	M.R.San.I., M.S.I.A., Certified Meat Inspector	Whole
Additional Sanitary Inspector	R. G. SUDDICK	C.R.S.I. AND S.I.E.J.B.	Whole
Health Visitor	MISS L. HENDERSON	Health Visitor's, School Nurse's and Sanitary Inspector's Certifi- cates, Royal Sanitary Institute.	Whole
Health Visitor	MISS K. M. HARVEY	HEALTH VISITOR'S CERTI- FICATE, S.R.N., S.C.M.	Whole

Longbenton Urban District Council.

Annual Report

OF THE

MEDICAL OFFICER OF HEALTH, Dr. THEODORE CRAIG,

For the Year ending 31st December, 1936.

TO THE CHAIRMEN AND MEMBERS.

As I made a very full report of conditions in Longbenton as I found them when I made my survey of your district in 1935, I am sure that you will be pleased to learn that my Report for the year 1936 will be much more brief.

I regret to report that in 1936 we experienced a considerable number of cases of Scarlet Fever and Diphtheria.

There has never been anything approaching an epidemic, but, every month a few cases occurred.

I am still strongly of opinion that the main sources are two:

- (1) Infection contracted by school children in public conveyances.
- (2) Infection from "Carriers," -i.c., patients suffering from a mild form of these diseases, showing few or no symptoms, and yet capable of infecting others.

So far as Public Transport is concerned I can see no remedy for this source of infection.

During the past year, with the help of my colleagues, I have made efforts to trace all possible "Carriers" and to have them removed to hospital and kept there until no evidence remained that they were capable of conveying infection.

I regret to report that this procedure has not been as effective as I had hoped.

On several occasions fresh cases have occurred shortly after patients had returned home from hospital.

When such cases have occurred I have advised my colleagues to take swabs from the nose and throat of every person in an infected house, and I hope, by this means, to detect "Carriers."

Isolation of "Carriers" involves greater expense to the Rate-payers, but, in my opinion, it is better to control "Carriers" in Hospital than to run the risk of an Epidemic.

Roughly speaking it is more economical to keep one "Carrier" under observation in Hospital for six months, if need be, than to have our hospital full up with patients, each of whom must stay for six weeks, or more.

I consider it my duty to repeat my observations on page 7 of my Report for 1935.

Until we have "Observation Wards" where suspected cases can be under observation until a definite diagnosis is made—without contact with definitely infectious cases—we shall continue to have sporadic cases of Scarlet Fever and Diphtheria in Longbenton area.

Every doctor meets cases which look like Scarlet Fever or Diphtheria, and, in the interest of Public Health, it is his duty to have such cases removed to Hospital—for observation!!

This comment applies particularly to an area such as Longbenton, where Isolation is impossible in the average home, because so many relatives and friends are continually running in to enquire for the patient.

If such patients do not show definite signs and symptoms within the course of a few days, they can be safely returned to their homes—if they have not been in contact with "proved cases," hence I ask again that Observation Wards be provided.

During the year 1936 the people of Longbenton have experienced almost every form of Infectious disease except Small-pox.

In my own practice I have had a remarkably large number of cases of Mumps; I have never seen so many in thirty years of general practice.

We have had the usual number of cases of Whooping-Cough and Measles, but nothing approaching epidemic figures.

There were quite a number of cases of Chicken-pox, none of them serious, but, it is interesting to note that I have never seen so many cases of "Herpes Zoster," commonly known as "Shingles," in any one year since I commenced practice.

The age incidence of my "Shingles" cases has been from 12 to 72 years.

For more than a decade experts have been trying to establish the cause of the relationship between Shingles and Chickenpox, but, up to now, nothing definite has been discovered.

The extent of my personal knowledge is that, if a child has Chicken-pox, one of the elders of the house may develop Shingles, and, conversely, that a case of Shingles in an elder person is often followed by one or more cases of Chicken-pox among infants in the same family.

I dealt at considerable length with the effects of Unemployment in our area in my Report for 1935, and have nothing further to add to that Report, except that I feel that conditions began to be less acute in the later months of 1936.

If I may express a purely personal opinion I would like to state that the problem of 1937 is to do something for the "Unemployables."

There are four Centres in our area whose work is detailed on page 10.

There is a definite number of men in our area who are physically and psychologically incapable of regular profitable Employment.

It is a distressing matter to see men, after ten years of enforced idleness, becoming reconciled to such unhappy conditions of life.

Once a man begins to think that he is useless it is only a matter of time until he " is" useless.

Special action taken to arouse public interest in the prevention of ILL HEALTH.

At the request of the Council I personally undertook all arrangements for "HEALTH WEEK," 1936, and I spent many hours trying to devise ways and means of creating public interest in Health Propaganda.

In conjunction with various Central Organisations I carried out a very complicated programme of Health Publicity.

I personally devised a "Health Motor Poster Lorry" which toured every part of Longbenton for six days.

Special posters were displayed, and changed every day, showing where Lectures and Demonstrations would be held.

The Lorry specialised each day in the area where a Lecture was to be given—often making a special circuit four times a day.

Large hoardings were erected outside the Clinics at Forest Hall and Dudley, and the Special Effort for each day was prominently shewn in a central poster which was changed every day.

We are greatly indebted to "NESCO" for Flood-lighting the hoarding at Forest Hall, which they did free of all cost to the Council. This hoarding was very striking and the lighting effect was beautiful, as the flood lights showed the beauty of the trees in front of the L.U.D.C. Offices as well as illuminating the Tram and 'Bus stops.

l also edited the "Health Book" published by the Holt Publishing Coy. of Manchester free of all cost to the Council.

I regret to state that I never saw one of my patients reading the book.

Lectures on Health subjects were given each evening in different parts of your area by local medical practitioners.

In order to create interest I persuaded some of my musical friends to precede each lecture with a concert, and I wish to take this opportunity of thanking them for their valuable assistance.

I wish also to thank Dr. Mona Macnaughton for the very great benefit we received from her first public lecture.

This was the only lecture which was decently attended, all the others were delivered to audiences whose numbers rarely exceeded twenty.

I wish to state that in my opinion the public do not want lectures.

May I therefore suggest that the entire propaganda for Health Week, 1937, be entrusted to the Central Council for Health Education.

At the moment I am glad to learn that you have decided to collaborate with the Central Council in their National Health Propaganda.

Through the kind co-operation of the proprietors and managers of the five Cinemas in our area a series of Health Lantern Slides was shown at each cinema every night, and slides were interchanged between the various halls twice weekly, so that each cinema shewed 12 slides.

On your behalf I wish to thank the management of

The Grand Theatre, Dudley.

The Queen's Theatre, Seaton Burn. The Coronation Theatre, Annitsford.

The Lyric Theatre, Burradon. The New Theatre, Forest Hall.

for showing slides and posting bills outside their premises.

I should also like to thank the Surveyor for erecting two such fine hoardings outside the Clinics at Dudley and Forest Hall. With his usual forethought he constructed the hoardings in such a way that they can be used for many years to come. One encouraging feature in our Health Week was the number of Essays written by school children on health subjects. To read and judge over a hundred essays was no light task, but, my labour was made light by the excellence of the essays and the proof that our teachers had given the children some valuable lessons on Diet and Personal Hygiene.

I wish to thank the Council for acceding to my request for additional Health Visitors.

Miss Harvey was appointed in March, 1936, and has proved herself to be very energetic, tactful and painstaking. She rapidly gained the confidence and esteem of mothers in the old Weetslade area, and all the Weetslade Clinics have been well attended and efficiently conducted.

It soon became obvious that it was impossible for one visitor, even working twelve hours a day, to cover such an extensive area, which includes Hazlerigg, North Gosforth, Wideopen, Seaton Burn, Dudley and Annitsford. The lack of public transport between Dudley and Annitsford made travelling very unpleasant during the winter months.

I also considered that the Longbenton area was too big for one Visitor to undertake Burradon, West Moor, Killingworth, Forest Hall, Benton, Palmersville and West Allotment.

I never cease to marvel at the wonderful way in which your senior Health Visitor, Miss Henderson, contrived to manage this very large district so efficiently.

I am bound to pay her an enthusiastic tribute for the remarkably efficient way in which her Clinics were conducted.

At the end of 1936 you appointed a third Health Visitor, and I have been able to rearrange the work, making all possible use of public transport, so that each of the Visitors will be spared many hours of trudging over muddy roads and footpaths in the winter months.

Mrs. Henderson—our new Health Visitor—has already impressed me with her ability and enthusiasm.

You asked me for a special report upon the Ministry Circular relating to additional services for mothers and children, and I am sure that you will remember that I expressed the opinion that, in Longbenton there was no immediate need for Toddlers' Clinics, Creches or Nursery Schools.—I would only like to repeat that the number of married women in regular daily employment in Longbenton is very small indeed.

Our people are all one family, kindly relatives are always willing to take temporary charge of infants in emergency.

Longbenton folk make good neighbours, so that if no relative is available, a good-hearted neighbour is easily found.

I am still of opinion that the Council should endeavour to make some arrangement for Convalescent Treatment of exhausted housewives and mothers, and, ancillary to that scheme, that you try to formulate some system for providing "Home Helps" in needful cases.

I would ask you to consider co-operation with the Rest Home at Whalton, where mothers are given a real rest in beautiful surroundings at a very moderate cost.

With regard to "Home Helps" I do not feel justified in suggesting that you make any definite appointments, but it might be possible for you to make some contribution to the cost of ordinary domestic help in cases where the family circumstances, financial and social, make such provision impossible without outside assistance.

You have undertaken responsibility for Maternity and Child Welfare work in your area, and, even if "Unification" eventually becomes necessary, I should like to leave Longbenton in such good condition that we need not fear criticism of our work for mothers and children.

My life-long ambition has been that I might so perform my duties that my successor would have to extend himself to carry on the work and find it hard to improve upon it.

SHORT PRECIS OF STATISTICS. Full particulars are given in Tables.

If you care to refer to Page 9 of my Report for 1935 you will be able to obtain a more thorough knowledge of conditions in 1936.

In 1936 our Total Deaths were 263 as against 282 in 1935.

As usual the main cause of death was Heart Disease—58.

Deaths from various forms of Cancer accounted for 27.

Deaths from Tuberculosis reached the figure 14.

There were 11 deaths from Digestive and Liver Diseases, and 2 from Appendicitis.

Pneumonia accounted for only 12 deaths, a remarkably low figure in an area where Influenza was rampant.

Unfortunately our Infantile Mortality is rather more than the average for all England. 30 children died before attaining the age of 1 year. Only 2 of these were illegitimate. Last year we had also 30 infants who did not survive for a year. I am concerned about the number of Still-Births in the area—12 in all, but only 2 were illegitimate.

I am unable to give you any reason for the number of Still-Births, but I am inclined to think that married women do not take sufficient care of themselves during pregnancy and continue to do heavy work, such as carrying coals and water, possing clothes and spring cleaning, and the various athletic exercises involved in white-washing ceilings, etc.

The one bright spot is the fact that only 2 Still-Births were illegitimate.

I ask you to note that our Birth Rate is 16:52 as against the average for all England -14:8.

The fact remains that the population of Longbenton was increased by 352, and, in the course of twenty years or so, many of them will be asking for Council houses. Hence we must go on building houses.

As I look out of my window I am glad to note that the new road between Dudley and Burradon is nearing completion. This road will do a great deal towards bringing Weetslade and Longbenton nearer together, and when the United 'Bus Company arrange a through service via our new road, we will be a more united family.

The members of the old Weetslade Council will note that I have recommended this new road for seventeen years.

I wish to thank you for providing a concrete record of my reports.

The old Field-path was known as "Dudley Fields," and conductors of 'Buses were not always cognizant of the old field path. I hope that in the near future, you will be able to make a good road between Dudley and Annitsford, as the existing paths are almost impassable in dirty weather.

Appendix 1. SECTION A. STATISTICS AND SOCIAL CONDITIONS OF THE AREA.— Area in Acres ... (1)6,843. Registrar General's estimate of population, (2)mid 1936 ... 21,300Number of Inhabited houses according to (3)Rate Book 6.162.Rateable Value (4)£101,332(5)Product of Penny Rate /387. . . .

Social Conditions. These matters were fully discussed in my report for 1935 and conditions remain much the same.

Earlier in this report I stated that I considered that there were signs of an improvement in Unemployment conditions towards the end of 1936.

WELFARE CENTRES.

Much valuable work has been done in the area by the erection, furnishing, financing and supervision of Centres for the Welfare of the Unemployed at Dudley, Annitsford, Seaton Burn and Forest Hall.

In all these areas premises are available for instruction, recreation and general encouragement for unemployed men and boys.

They are encouraged to learn various crafts, such as carpentry and cobbling. Materials are provided at cost price, and Instructors paid by the Northumberland Advisory Committee for Community Clubs and Unemployed Welfare Work regularly attend all the Centres.

These local Clubs have been generously supported by the Staff of the Inland Revenue Department at Somerset House—without their sympathy and generous financial help we could not carry on.

It has been a great pleasure to me to note the good work which has been done in these Centres and the variety of the work.

All amusements are catered for, from drama to boxing, and the encouraging effect upon the physical and psychological conditions of the Unemployed has well repaid our efforts.

On behalf of the Scaton Valley Committee I wish to express our gratitude to those Councillors who have interested themselves in this good work, and to remind you that you will always be welcome at any time when you can spare an hour to visit the Centres.

Only those in close touch with the Unemployed can realise the appalling effect of continued unemployment upon our people.

The Centres are available for men in employment and we are glad to welcome them because, in my opinion, the man who has been out of work for many years is apt to develope a feeling that he is of no use to himself or to the community.

The very fact that he is able to meet on terms of equality old friends who are so fortunate as to have regular employment, helps him to keep on trying. Please help us with this necessary work.

TABLE A.

SECTION A. STATISTICS AND SOCIAL CONDITIONS. The Registrar General estimates our population at 21,300.

VITAL STATISTICS.

				Males.	Fema	des.	Total.
Live Births				187	165	<u></u>	352
Legitimate				182	158	3	340
Illegitimate				5	7	7	12
Still Births				8	-	į	12
Legitimate				7	4.	1	11
Hlegitimate				1	()	1
Birth Rate per 1,	()()()	populatio	11				16.52
Still Births per 1,							
Still Births per 1,	()()()	populatio	m				0.56
				Males.	Fema	les.	Total.
Deaths				147	110	3	263
Death Rate per 1	,000	populati	on			-	12:34
Deaths from Puer	rpera	il Causes				l	1

In connection with Deaths from Child Birth and Puerperal Causes it is interesting to note that the Death Rate is slightly higher among women in good financial circumstances than in women not so well off.

The Death Rate of Hospital cases is always higher than the Death Rate in women confined in their own homes, but it is necessary to remember that only a small proportion of normal confinements occur in Hospital.

The hospitals have to deal with cases whose condition is such that, in the opinion of the family doctor, specialist attention is necessary.

In other words, it is only reasonable to conclude that the risk is much greater in complicated cases than in normal confinements.

Some years ago you initiated a scheme whereby any doctor attending a women who required specialist treatment was authorised to send her into the Princess Mary Maternity at your expense.

You provided a special form which the doctor filled up and sent to the M.O.H. for approval.

I regret to note that many doctors have neglected to send me the form, but in the majority of cases I was consulted by telephone. I have already suggested that a further letter be sent to doctors to remind them that you cannot be responsible for fees unless the necessary form has been submitted to me and countersigned by me. It is not reasonable to suppose that I should authorise a charge upon our ratepayers in connection with a case where I have not been notified.

This slackness about formal notification has been the cause of much unnecessary correspondence for me and your clerk and corresponding delay in settling accounts.

Death Rate per 1.000 Live Births of Infants under one year of age :—

All Infants per 1,000 Live Births	85.22.
Legitimate İnfants per 1,000 Live Births	82.35
Illegitimate Infants per 1,000 Illegimate Live Birt	hs 166:00
Illegitimate Infants per 1,000 Legitimate Live Bird	ths 5.85
Death from Measles (all ages)	. 2
Deaths from Whooping Cough (all ages)	. 2
Deaths from Diarrhoea (under 2 years of age)	. 6

Section B.—General Provision of Health Services for the Area.—

(1) Full particulars of the Public Health Officers are given on page 2 of this report.

All other particulars were given in detail in pages 13 and 14 of my Report for 1935.

I am glad to report that attendances at the Ante-Natal Clinics at Dudley and Forest Hall have increased in 1936.

The result of this work has proved its value.

There is no doubt that careful ante-natal supervision has done a great deal to promote the excellent maternity statistics of the area.

I wish to thank my colleagues, Doctors Harper, Gordon, Brooks, Law and Fullerton, for their helpful collaboration in this work.

Expectant mothers are beginning to realise that it is worth while to attend the Clinics. They feel that we are doing our best to remove the Fcar of child-bearing which has been so large a factor in making childbirth such an anxious time.

We are able to send women away comforted by the assurance that everything is going on nicely, thus putting them in good heart for the ordeal of labour, and, in addition, we are able to take every precaution in cases where some difficulty may be expected.

The most pleasant part of my work as your Medical Officer is the supervision of your Child Welfare Clinics.

These give me the opportunity of examining hundreds of very beautiful healthy children and 99% of our children are fit and very well cared for—and also to advise the mothers, who frequently are much more in need of attention than their infants.

The ordinary ailments usual in children in industrial areas are practically unknown in Longbenton; we have not a solitary case of serious Rickets in all five Clinics.

I would like to take this opportunity of thanking those local ladies who have given us such valuable assistance by devoting some of their hardly-earned leisure hours to this work.

I do wish that we could arouse more interest in this work and we should be delighted to welcome any ladies who would like to come to the Clinics. We can find useful and interesting work for three times the number of ladies who have come to help us.

Will you kindly pass this information to your matronly friends; there is nothing like working among babies to keep women young.

This work helps to fill in the difficult period when our own children no longer require our personal help and the time when we can live youth over again in the company of our grandchildren.

CLINICS.—

Previous to the Amalgamation of Weetslade and Longbenton, the Child Welfare and Ante-Natal Clinics in Weetslade were carried on under the Northumberland County Council, and this arrangement was continued to the end of 1935.

In 1936 Longbenton took over the work and the Clinics were placed under my control.

Owing to financial stringency I was compelled to modify my plans for these Clinics, but I am glad to report that the existing scheme is working well and showing excellent results.

The greatest problem is to persuade mothers to come early.

The whole scheme was fully described in the "Health Book" for 1936.

I am entirely in agreement with the policy of the British Medical Association which stresses the advisability of obtaining the services of all the General Practitioners in the area for this valuable work.

The Ante-Natal Clinics are conducted by a Panel of local doctors, so that expectant mothers can be examined and advised by their own family doctors at least twice during pregnancy, and mothers can also be examined by me or my Deputy—Dr. Louisa Harper—during the same period.

I feel very strongly that it is necessary to have more personal supervision over the Child Welfare Clinics to ensure continuity of treatment, so I undertake the Clinics at Dudley and Seaton Burn, and Dr. Harper looks after Burradon, Forest Hall and West Allotment, under my supervision. I visit all the Clinics occasionally.

Each Clinic is organised by a Health Visitor who attends weekly for distribution of dried milk, etc., and advises the mothers.

The outlying small centres at Seaton Burn, Burnadon and West Allotment are attended by a doctor once in four weeks, and the main Clinics at Dudley and Forest Hall are medically attended on alternate weeks.

In cases where there is any definite urgency, mothers from the out-lying Clinics are encouraged to attend at Dudley or Forest Hall, and in this way they are able to see the same doctor who attends the outlying Clinic.

Midwifery and Maternity Services.—

In 1936 you arranged to have the services of the "Flying Squad" from the Princess Mary Maternity Hospital. This arranges for the dispatch of a Trained Nurse in a motor car, equipped with every possible necessity for adequate treatment of any woman in labour who is too ill to be removed to Hospital. At the request of the family doctor a member of the Consultant Staff will come in the same car.

In my opinion, by this scheme, you have put the finishing touch on a Maternity Welfare Scheme second to none in this country.

I think it is advisable to include a short summary for the benefit of the Ministry.

- (1) Ante-Natal Clinics
- (2) Free consultant advice at Princess Mary Maternity Hospital.
- (3) Free conveyance by Council Ambulance for private consultation at Consultants' residence, where a patient is too ill to attend Hospital.
- (4) Fresh dairy milk for three months before and after confinement.
- (5) Regular Ante-Natal visits by highly qualified Health Visitors.
- (6) Personal attendance at the home by a recognised Consultant, at any time by request of the family doctor, after telephone consultation with the M.O.H.
- (7) Personal attendance at confinement in patient's home by a Consultant Obstetrician, at the request of the family doctor.

- (8) Conveyance to Hospital by Council ambulance of any urgent case by request of the family doctor.
- (9) Free treatment in Hospital of any woman who needs special care, after consultation between the family doctor and the M.O.H.
- (10) Post-Natal care at the Aute-Natal Clinics.

SECTION C.

Full particulars are given in my report for 1935.

Section D is dealt with in detail in the Report of the Sanitary Inspector who as Inspector of Food deals with Section E.

NUTRITION. I have made exhaustive experiments in regard to the value of various forms of Dried Milks and am satisfied that every infant attending your Clinics is receiving adequate diet.

It is obviously impossible for us to stock every Infant Food on the market, but we try to provide the very best.

APPENDIX 1. SECTION F.

Prevalence and Control over Infectious and other Diseases.

I have already dealt with this matter in my general report.
I trust that a new Infections Diseases Hospital will soon be built.

IMMUNISATION AGAINST DIPHTHERIA. --

Towards the end of 1936 you allowed me to organise a modified scheme for immunisation of infants under school age.

Arrangements were made with all the local doctors and a circular letter was sent to each doctor indicating my suggestions for this work.

I reported that there was not any great demand for immunisation in the area, and results have proved that only a few parents took advantage of your offer, although posters were distributed in every part of the district.

Such children as were inoculated have escaped Diphtheria and none showed any ill effects of this procedure.

Facilities are still available from all local doctors and at the Child Welfare Clinics.

Appendix 2.

Statistics provided by the Registrar General.

These are provided in the various Tables appended.

I have the honour to remain,

Your obedient servant,

THEODORE CRAIG.

TABLE B.

CASES OF INFECTIOUS DISEASE NOTIFIED DURING THE YEAR, 1936.

	No. of		:::=::::	14
Total	Cases Removed	to Hospital.	So : : : : : : : : : : : : : : : : : : :	191
		65 and over	::::o1w	∞
		45 to 65	::4 ::::::	7
		35 to 45	: :0 : : : : : : :	\$
		20 to 35	:::0:::::::::::::::::::::::::::::::::::	17
TED.		15 to 20	: :° 2 : : : : : : :	16
OF CASES NOTIFIED		10 to 15	::618::::::	62
SS N	ROUP.	5 to 10	3: :: :: :: :: :: :: :: :: :: :: :: :: :	82
CASE	AGE GROUP	to v	:: : : : : : : : : : : : : : : : : : :	16
OF	AG	ε 0 ₄	[-06] [- : : : : : :	13
BER		3 \$ 6 12	: :ωω :4 : : : : : :	16
NUMBER		1 0 61	::01-:-::::::	4
		$\begin{array}{c} \text{Under} \\ 1 \\ \text{Year.} \end{array}$: : : : : : : : : : : : : : : : : : :	3
		At all Ages.	$\begin{array}{cccccccccccccccccccccccccccccccccccc$	255
	Diensen	Distract.	Smallpox Enteric Fever Scarlet Fever Diphtheria Frysipelas Pneumonia Encephalitis Lethargica Puerperal Fever Puerperal Pyrexia OphthalmiaNeonatorum Dysentry Cerebro Spinal Fever	TOTALS

TABLE C.
TUBERCULOSIS, 1936.

	C	ASES N	OTIFIED	٠.	I	DEATHS								
Age Periods.	Pulm	onary		on- onary.	Pulmo	nary.	Non- Pulmonary							
	М.	F.	М.	F.	М.	F.	М.	F.						
Under I year														
1—5 years		2		1										
5—10 ,,		1						1						
10—15 ,,	3	1		1										
15—20 ,,							1							
20-25 ,,	4	1	1	2	1									
25—35 ,,	4	5			2		1							
35—45 ,,	1	1	1		2	1		1						
45—55 ,,		2	1		1	1	1							
55-65 ,,		1				1								
35 and upwards		• • •		•••		• • •		• • •						
Totals	12	14	3	4	6	3	3	2						
. 7								الما الما الما الما الما الما الما الما						

Of the 14 Deaths 11 were Notified cases upon the T.B. register.

TABLE D.

BIRTH RATE, DEATH RATE AND ANALYSIS OF MORTALITY DURING THE YEAR 1936, (The Mortality Rates for England and Wales refer to the whole population).

Contract of the last of the la	A Description of the Same		
Rate Per 1,000 Live Births.	Total Deaths under 1 Year,	59	85-22 78-3
Rate 1,0 Live	Diarrhæa and Enteritis under 2 Years.	5.9	17.04
	Smallpox.	:	
IION.	Enteric Fever.	0.01	: :
Annual Death Rate per 1,000 Population	.95neloiV	0.52	0.65
1,000 د	Influenza.	0.14	0.18
ATE PEF	Diphtheria.	0.02	0.51
ЕАТН К	Whooping. Cough.	0.05	0.093
NUAL D	Scarlet Fever,	0.01	: :
AN	Measles.	0.02	0.093
	All Causes.	12.1	12.34
Rate Per ,000 Total Population.	Still Births.	0.61	0.56
Rat 1,000 Popul	Live Births.	14.8	16.52
		ENGLAND AND WALES	Longbenton (1936) (1935)

TABLE E.

						Males.	Females.
Typhoid and	Para 1	'y phoie	1			~	
3.1							2
Scarlet Fever	ľ						
Whooping Co	ough					1	1
Diphtheria						-1	7
Influenza						2	2
Cerebro Spin						1	← .
Tuberculosis	of Resp	oirator	v Syste	em.		6	3
Other Tuber	culosis					3	2
Cancer						14	13
Diabetes						1	1
Cerebral Hæ		ge, etc.				8	8
Heart Diseas						42	16
Other Circula	atory D	iseases				11	6
Bronchitis						5	3
Pneumonia						6	6
Peptic Ulcer						1	1
Diarrhœa (u	nder 2 j	cears)				3	3
Appendicitis						1	1
Other Diseas						2	3
Other Digest						3	3
Accute and (itis			4	2
Other Puerpe		eases					1
Congenital C	auses					5	10
						3	8
Suicide						5	1
Other Violen						7	1
Other Define						8	11
III Defined D) iseases	or not	knowr	1		1	1
All causes						147	1.1.6
All Causes	• • •			• • •	• • •	147	116

FACTORIES, WORKSHOPS AND WORKPLACES.

1.—Inspection of Factories, Workshops and Workplaces.

р .	Number of											
Premises.	Inspections.	Written Notices.	Occupiers Prosecuted.									
Factories												
(including Factory Laundries) Workshops	3		* * *									
(including Workshop Laundries) Workplaces	7	* * *	* * *									
(other than outworkers premises.	I	• • •										
TOTAL	11											



Longbenton Urban District Council.

Annual Report

OF THE

SANITARY INSPECTOR, WILLIAM N. LOCKEY.

FOR THE YEAR ENDED 31ST DECEMBER, 1936.

TO THE CHAIRMAN AND MEMBERS OF THE LONGBENTON URBAN DISTRICT COUNCIL.

In accordance with Circular 1417 from the Ministry of Health, I beg to submit my Annual Report for the year ended the 31st December, 1936.

This year has been one of unusual activity, in so much that above the ordinary work of Sanitary Inspection and keeping abreast with the Housing Programme, a Privy Conversion Scheme of 1202 closets, and the Overcrowding Survey under the Housing Act, 1935, have been carried out.

The former scheme was wholly carried out by this Department, the Specifications for the P.C. items and the carrying out of the Contract being prepared in this Office. The supervision of the Contract entailed a considerable amount of work, necessitating many hundreds of visits, the recording of which had to be dispensed with.

Temporary Enumerators were employed for the Inspections under the Form A for the Overcrowding Survey. The Form B Inspections, the completion of the data, and the preparing of the necessary tables were carried out by the staff of this Department. Further particulars are given later in this Report.

Housing may have had a temporary setback as a result of the above, but it is anticipated that by the end of 1937 the work of this Department in connection with the Council's programme will be nearing completion. One Public Inquiry was held, and orders confirmed in in respect of Four Clearance Areas, and undertakings were accepted to close the houses in three other Areas.

Official Representations were made for Eight Areas with a total of 156 houses, and reports were submitted in respect of two individual Unfit Houses, undertakings being accepted to close the whole of one house and part of the other.

Re-housing of tenants from Front Street, Annitsford, Joyces Row, and Varley's Buildings, Dudley, Clearance Areas were completed before the end of the year. The furniture and effects of each being disinfested with Hydrogen Cyanide, the work of fumigation and removal being carried out by contract.

SANITARY CIRCUMSTANCES OF THE DISTRICT.

Water Supply.—No alteration has been made during the year, the whole of the area being supplied by the Newcastle and Gateshead Water Company. In part of the Area, viz., Annitsford, Dudley, Seaton Burn and Wideopen, the Council are the Water Authority, obtaining bulk supply from the aforementioned Company, and in the rest of the area, the Water Company are the Water Authority. Extensions of water mains have been made to two housing estates.

SEWERAGE.—All the Sewerage with the exception of that from Hazelrigg and North Gosforth gravitates to the sea, via.

- (1) The Seaton Valley Joint Sewerage Board Sewer.
- (2) The Scaton Valley Urban District Council Sewer through Briar Dene.
- (3) The Tidal Waters of the Tyne, (a) part into the Ouseburn Sewer of the Newcastle Corporation, and (b) part into Wallsend Borough Sewer.

With regard to 3a, there is a separate system of drainage and all surface water is delivered into water courses.

From the part of the Area mentioned above, not draining into the sea, the Sewerage is dealt with at a small Sewerage Disposal Works of the Septic Tank principle.

Scavenging.—The collection and disposal of refuse is carried out by direct labour under the supervision of the Surveyor. In the mining parts of the district a bi-weekly collection is now in vogue owing to the very large ash content of the inferior coal used.

Sanetary Conveniences.—As mentioned before a Privy Conversion Scheme was carried out during the year, reducing the number of dry closets in the Area to 396. As most of the houses concerned are to be dealt with under the Housing Act, it is anticipated after completion of the Slum Clearance Programme, dry closets will only exist on premises isolated from Sewers.

Housing Act, 1935. Overcrowding Survey. The Survey of the working class houses in the area revealed 514 or 11.96% to be overcrowded, according to the standard set out in the Act. The houses in prospective Clearance Areas were inspected but omitted from the Final Figures as it is anticipated the Overcrowding will be abated in the normal process of rehousing from Clearance Areas.

It was found possible to abate Overcrowding in 20 cases by using houses surplus to the requirements of the Annitsford and Dudley Clearance Areas and also by re-arranging tenancies of Council Houses where any became vacant.

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n progress or dealt with.	10		857	ى ئ	٤/	36	2	-	-	(က	3		::	2	:	œ	:	:	:	_	:	¢1	:		:	:	1023
Sofects remedied thereafter.	6		165	00	:		1	:	:		:	:		: 6	30	က	:	:	:	:	:	:	C1	•	:			232
Number of X-YTVTORY X	S		ıo	:	:	: 00	8	:	:		:	:				_	:	:	:	:	:	:	Ç1	:	:	:	:	99
Defects remedical thereafter,	7		166	ကင္	01	:	•	:	:	1	က်	$\frac{1}{\infty}$			10	_	:	:	:	:	:	:	9	:	_	_	:	221
Yumber of IXFORMALAL Actices served.	9		105	: 1	_	:	:	:	:	,	- ;	14		: '	o	:	:	:	:	:	:	:	က	:	_	_	:	137
Number remedied after letter or interview.	ıc		104	: 9	7.	- 0)	4	9		20	86		64	60	4	9	_	_	:	_	ಣ	=	:	œ	Ç1	:	392
.ivroT	4		1292	<u>†</u>	99	61 0	2	ıo	7	1	58	119		45	162	œ	<u>s</u>	_	_	:	ଚୀ	က	21	:	6	က	:	1868
Number outstanding from previous year,	8		353	21 ;	=	: "	>	:	_		ಣ	S		C1	06	4	9	:	:	:	_	3	S	:	:	:	:	502
Yumber of Defects or Contraventions of Bye-laws.	cı		939	81 9	2	2 9	3	ıo	9		25	111		43	75	4	<u>C1</u>	_	_	:	_	:	16	:	6	က	:	1366
Yumber of Inspections Auring year,	-		0	2362		903 38	33	13	OI		269			9481		199	143	$\frac{\infty}{\infty}$	C1	က	6	+	- 1	:	22	C1	17	7299
			I)	- '																							•	
			le I	:	:	:	:	:	:		:	:		:	:	:	:	:		•		•	•	:			•	
			y of Table	:	:	:	:		:		:	:		:	:	:	:	:	:	:	:	:	es.	:	:	:	:	:
																	sdo						otacles					
			nma	:	:	:	:	:	:		:	:		:	:	:	ilksh	:	:	:	ces	:	secel	:	:	:	•	:
			(Sun	ore	:	:	:	:	:		:	:	NCES	:	:	etc.	nd M	:	:	:	kpla		nd F	rsed	suoi	:	:	
			ects	I-St									SNIE			es, (ls ar				1/.or	rals	its a	rly. 1	ulati			
			Det	F00(:	ding	Id	it	tory		ıt.	:	ONVI	1t	:	-sto	shec	onse	, etc	ades	and	Anin	Ashp	rope	cnm	ance	: · · · · · · · · · · · · · · · · · · ·	TOTAL
		1	tura	tive	ness	row(SITE	icien	tisfac	GE-	icier	tive	ZY C	icier	tive	1,00d	Com	er H	ans	re Tr	ops	of.	iry r	imp	re ac	Zais	itore	
		Housing	Structural Defects (Summar	Defective Food-Store	Dampness	Overcrowding Nuisances	WATER Supply	Insufficient	Unsatisfactory	DRAINAGE-	Insufficient	Defective	SANITARY CONVENIENCES	Insufficient	Defective	Shops, Food-stores, etc.	Dairies, Cowsheds and Milkshops	Slaughter Houses	Tents, Vans, etc.	Offensive Trades	Workshops and Workplaces	Keeping of Animals	Insanitary Ashpits and Recep-	Ashpits improperly used	Offensive accumulations	Smoke Naisances	Petrol Stores	
		Hol	'X'	-		J /	¥.//	_		DR.	I		SAN	_		Sho	Dai	Sla	Ter	Off	11.0	Ke	Ins	As	Off	SIII	Pet	

TABLE II.

		sing (Con						
		tement as Erecter					for Year	1936.
1	TOUSES	ERECTEL) DURING	11115		:AK .— :h State		
						istance	. Unaided.	Total.
		Authorit				60	1 (1	60
(b) B	y other	Bodies or	: Persons		•		141	141
						60	141	201
1.—[5	SPECTI	on of Dw	ELLING F	lousi	es D	 URING	тне Уель	· ·
		Total nur						•
	, , , ,	for hou	sing defec	ts (ur	ıder	Publi	c Health	
	/1.		sing Acts)					616
	(b)	Number (of inspecti	ons n	iade	tor th	ie purpose	2362
((2) (a)	Number of	ad (1) abo	yo w	ses (: driel	metud Mara	ed under inspect	
			l recorde					
			dated Reg					224
	(b)						ie purpose	1491
(aber of d						
		e so dange						0
		nfit for hi						159
(nber of dv red to unc						
		to be in all						
		tation						205
2.—R	EMEDY	of Defe	CTS WITHO	out S	ERV	ICE O	f Formal	
		OTICES:—						
	Numb	er of defe	ctive dwel	ling l	ious	ses ren	dered fit	
			uence of i					
			y or its of				• • • • • • • • • • • • • • • • • • • •	113
		INDER ST.					1.00	
		oceedings			s 17	, 18 a	nd 23 of	
		e Housing - Number			uise	e in re	espect of	
	(1)		notices "			_		
		repairs					_	5
	(2)	Number	of dwell	ing h	ous	es wh	ich were	
			l fit after s					
			By owne					9
		(0)	owners	LAMU	поп	ty m o	lefault of $\frac{1}{4}$	9
	(B)P	ROCEEDIN:	GS UNDER	Pur	 BLIC	Нелі	 .тн Астs :-	
		Number						
		which	notices v	vere	SCT	ved i		
		defects t	to be reme	edied			•••	57

		(2) Number of dwelling houses in which defects were remedied after service of formal notices:— (a) By owners 73 (b) By Local Authority in default of owners	73
		 PROCEEDINGS UNDER SECTIONS 19 AND 21 OF HOUSING ACT, 1930:— (1) Number of dwelling houses in respect of which Demolition Orders were made (2) Number of dwelling houses demolished in pursuance of Demolition Orders 	
	(1))-	 PROCEEDINGS UNDER SECTION 20 OF THE HOUSING ACT, 1930:— (1) Number of separate tenements or underground rooms in respect of which Closing Orders were made (2) Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or room having been rendered fit 	
4		BER OF HOUSES PERMANENTLY DISCONTINUED WELLINGS AND NOT INCLUDED ABOVE	7
	Hous	SING ACT, 1935.—	
(11)	(i) (ii) (iii)	Number of dwellings overcrowded at the end of year Number of families dwelling therein Number of persons dwelling therein	494 494 2810
(b)	(i)	Number of new cases of overcrowding reported during the year	Nil
(c)	(i) (ii)	Number of cases of overcrowding relieved during the year	20 115
(d)		Particulars of any cases in which dwelling houses have again become overcrowded after the Local Authority have taken steps for the abatement of overcrowding	Nil
(e)		Any other particulars with respect to over- crowding conditions upon which the Medical Officer of Health may consider it desirable	7 * 1
		to report	Nil

TABLE III. SUMMARY OF WORK EFFECTED.

	After Letter or Interview.		After Statutory Notice.	Total.
SANITARY CONVENIENCES—				
Privies abolished			1201	1201
Privies repaired			25	25
Privy ashpits abolished	***		103	103
Privy ashpits roofed or				
repaired	•••		•••	
Pail-closets abolished		• • •	1	1
Water-closets provided	3		1202	1205
Water-closets repaired	75		3	78
Sanitary bins provided	I		1217	1218
Sanitary bins renewed	9		1	10
New drains constructed	6		1202	1208
Drains repaired or recon-				
structed	18			18
Additional gullies provided	5			5
Old gullies replaced	9			9
Scullery sinks provided	4			4
Scullery waste-pipes repaired	1	6	• • •	7
Scullery waste-pipes trapped	2	2		4
Yards repaired or recon-				
structed	36			36

MEAT.

1.—MEAT INSPECTION.—The following summary shows the work done under the Public Health (Meat) Regulations 1924, during the year 1936. Number of Visits Paid:—

(a)	Slaughterhouses					818
	Butchers' Shops,	etc.	• • •	• • •	• • •	199
						1017
Number of	Bovine Carcases					815
Number of	Sheep Carcases					1907
Number of	Pig Carcases	• • •	• • •		• • •	659
						3381

As a result of these inspections and examinations 164 separate diseased and unsound conditions were found, and the carcases or organs dealt with. Details of the conditions are given below:—

Weight in the

BOVINE CARCASES -

BOVINE CARCASES.—		Weight	ın Ibs.
68 separate seizures affected with	1 Tuberculosis	•••	3447
8 ,, ,, ,,	Cirrhosis		63
6 ,, ,, ,, ,,	Liver Fluke		50
8 ,, ,, ,, ,,	Abscesses		146
3 Unborn Calves			84
			3790
Sheep Carcases.—		Weight	in lbs.
15 separate seizures affected wit	h Echinococcus)	20
	Veterinirum	}	30
13 ,, ,, ,, ,,	Strongylus	}	25
	Refescens	<i>···</i>	23
1 moribund Carcase	• • • • • • • • • • • • • • • • • • • •		30
			-
			85
Pig Carcases.—			
34 separate seizures affected with	1 Tuberculosis		441
3 ,, ,, ,,	Cirrhosis		13
3 ,, ,, ,,	Necrosis		13
1 ,, ,, ,, ,,	Bruising		11
1 Emaciated Carcase			46
			524
Total Weight of Meat dealt with	in lbs		4399
No dispased or uncound con-	litiona mora fam	v1 in im	norted

No diseased or unsound conditions were found in imported Meat during the year.

The Butchers in the area are to be commended on the good quality of animals slaughtered, as can be seen from the small amount of meat condemned.

SLAUGHTERHOUSES.—There are nine Slaughterhouses in the Area, and all are in good structural condition, eight have been in regular use during the year.

SLAUGHTER OF ANIMALS ACT.—The Section of the Act which requires the stunning of Sheep is adopted in the Area. No difficulty has been found in the operating of the Section.

TABLE IV.
FOOD INSPECTION.

Unsound Fe	ood.	Sur- rendered.	Seized.	Lega Proceed ings.
Beef (Home-killed)	Stones	2703		
,, (Imported)		***		***
Mutton (Home-killed)	• •	6		4
	*** 11		***	
Pork	***	$37\frac{1}{2}$		
Game	Lbs.		***	
Poultry	* * * *	***		
Fish	* * *			
Fruit	Lbs, or Cases			
Canned Goods	Tins or Cases			
Bacon	Lbs.			
Cheese				
Butter	,,			
Lard	,,			

MILK SUPPLY.

1.—MILK AND DAIRIES ORDER, 1926.—The following is a summary of the particulars in the Milk and Dairies Register at the 31st December, 1936:—

Number of persons registered as Cowkeepers	21
Number of premises registered as Cowsheds	26
Number of Cows kept on Registered Premises, approx. 4	124
Number of Cowkeepers retailing Milk	19
Number of persons registered as Dairymen in the Area	21
Number of Dairymen outside Area retailing in the	
Area	25
Number of premises registered as Dairies	22
Number of persons registered as Retail Purveyors	57

2.—Milk Special Designation Order, 1936.—The following are particulars of Licences granted under the above order: Premises Licensed for storage and sale of Certified Milk ... 1 Premises Licensed for storage and sale of T.T. Milk ... 1 Premises Licensed for storage and sale of Pasteurised Milk 7 Supplementary Licences to Retail Grade A.T.T. Milk ... 2 Supplementary Licences to Retail Pasteurised Milk ... 1 Supplementary Licences to Retail Accredited Milk ... 1

The Cowsheds in the Area can be considered to be in a good structural condition. As a result of representation from this Department many alterations have been carried out during the year.

Bacteriological Examination of Milk.—Samples of Milk from each supply were submitted to the County Laboratory for Bacteriological examination and Biological Test.

At the beginning of the year, samples were examined for Total Bacterial Count and B. Coli. During the year, however, the Methylene Blue Reduction Test was adopted in place of the Total Count. Samples were taken as satisfactory when up to Grade A standard for cleanliness.

It will be noted from the final table that Milks produced outside the Area, show a very high percentage of Positive T.B.

	Pro	Total.	
	In the Area.	Outside the Area.	Total.
Number of samples collected Number examined for Total Bacterial	25	14	39
Count	$\frac{4}{20}$	4	8 29
Number examined for by Meth. Blue Test Number examined for Bacillus Coli	$\frac{20}{24}$	13	37
Number examined for Tubercle Bacilli	25	14	39

MILK PRODUCED IN THE LONGBENTON AREA.

Examination	Satisfactory	Unsatisfactory	Total	%
Total Bacterial Count per C.C. Methylene Blue B. Coli	4 15 17	 5 7	4 20 24	100 75 71 ·2
All respects (1936)	16	8	24	66 •6
All respects (1935)	19	8	27	70 ·3

MILK PRODUCED OUTSIDE THE LONGBENTON AREA.

Examination	Satisfactory	Unsatisfactory	Total	07	
Total Bacterial Count per C.C. Methylene Blue B. Coli.	4 7 9	 2 4	4 9 13	100 77 ·7 69 ·2	
All respects (1936)	8	5	13	61 -6	
All respects (1935)	5	13	18	27 · 7	

GRADED MILK.

Examination	Satisfactory	Unsatisfactory	Total	0/0
Total Bacterial Count per C.C. B Coli.	4 3	···i	4 4	100 75
All respects (1936)	3	1	4	75

TOTAL NUMBER SAMPLES TAKEN.

Examination	Satisfactory	Unsatisfactory	Total	0 /	
Total Bacterial Count per C.C. Methylene Blue B. Coli.	12 22 29	7 12	12 29 41	100 75 ·8 70 ·7	
All respects (1936)	27	14	41	65 ·8	
All respects (1935)	24	21	45	53 · 3	

TUBERCLE BACILLI.

				SAMP	LES 7	[ake:	N.				
Produced in Longbenton Area.				Produced outside Longbenton Area.			Total.				
	Negative.	Positive.	Total.	Negative.	Positive.	Total.	Positive %	Negative.	Positive.	Total.	Positive %
1936	23	2	25	8 , 9	5	14	35.7	32	7	39	17.94
1935	24	2	26 7	69 10	2	12	16.6	34	4	38	10.5

Three samples of Graded Milk were submitted for T.B. and one, a T.T. sample, was certified as Positive.

Shops Acts, 1912—1934.—The notices outstanding from the previous year were all complied with. Informal notices were served where reasonable temperature was not maintained. In one case it was necessary to report the matter to the Council, a statutory notice being served and complied with within the time stated.

FACTORIES AND WORKSHOPS.—The following is a list of the Factories in the Area:—

Mineral Waters	 		• • •	2
Garages	 			6
Joiners	 			2
Engineers	 • • •	• • •		2
Boot Repairers	 		• • •	4
Blacksmiths	 • • •	• • •		5
				21

The following is a list of the Workshops in the Area:—

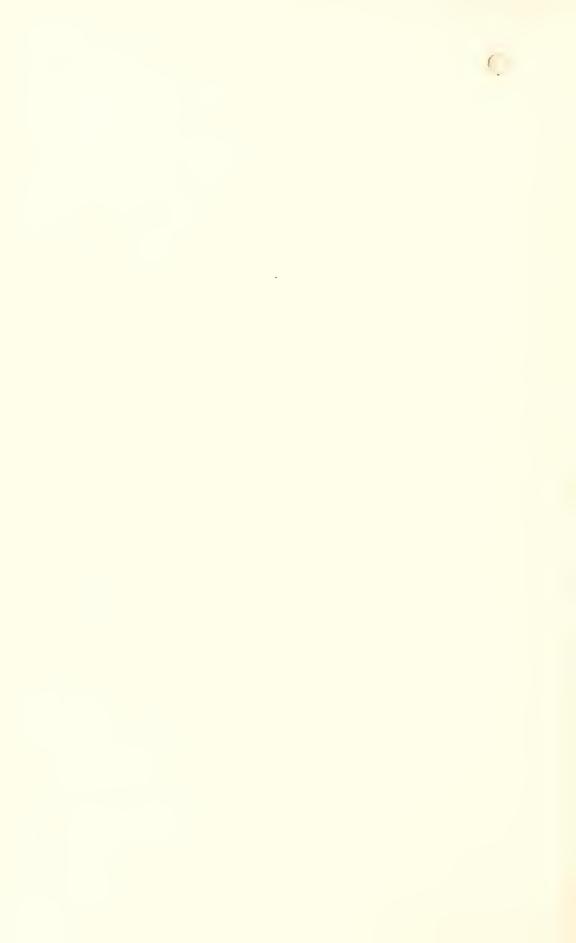
Boot Repaire:	rs					3
Joiners and I		S				22
Blacksmiths					• • •	4
Plumbers						6
Garages	• • •				• • •	14
Bakehouses			• • •			6
Dressmakers			• • •		• • •	4
Cycle Repaire				* * *	• • •	5
Jam Factories	· · ·		• • •		• • •	1
Market Garde	ns				• • •	6

71

FOOD AND DRUGS. Particulars of samples of Food and Drugs taken for analysis in the Longbeuton Urban District during the year 1936, and provided by Mr. S. Strugnell, County Inspector.

No. of	Description	RESULT C	Action		
Samples Taken.	of Article	Genuine.	Not Genuine.	Taken	
1	Apricot Jam	1	• • •		
$\frac{1}{2}$	Baking Powder Butter	$\frac{1}{2}$			
1	Cheese	1	***		
1	Cheshire Cheese	1	* * *		
2	Cocoa	$\frac{1}{2}$			
$\frac{7}{2}$	Coffee	$\frac{1}{2}$	***		
1	Coffee and Chlcory	ĩ	***		
4	Condensed Milk	4			
1	Cornflour	1			
3	Demarara Sugar	3			
1	Dried Apricots	1			
1	Golden Syrup	1			
1	Ground Almonds	1			
1	Ground Ginger	1			
1	Honey	1			
1	Lard	1			
1	Lemon Peel	1	•••		
1	Margarine	1		No action	
30	Milk	26	4	taken	
1	Mincemeat	1	•••		
2	Pepper	2	***		
1	Pork Sausage	1	• • •		
1	Salad Cream	1	•••		
l 1	Sausage	1	•••		
1	Self-raising Flour Semolina	1	***	. D	
1	Spiced Ham	1	1	Prosecution withdrawn on	
1	Strawberry Jam	1	1	payment of	
1	Sultanas	1	***	£1 5s. costs.	
î	Table Jelly (Lemon)	Ī	•••		
$\frac{1}{2}$	Tea	$\overset{\scriptscriptstyle{1}}{2}$	***		
ĩ	Tinned Cream	ī	• • •		
î	Tomato Ketchup	i			
4	Vinegar	4			
3	Whiskey	3	• • •		
3	Yeast	3	•••		
83		78	5		

Yours faithfully, W. N. LOCKEY, Sanitary Inspector.



Longbenton Urban District Council.

Annual Report

OF THE

HEALTH VISITORS,

L. HENDERSON and K. M. HARVEY.

FOR THE YEAR ENDING DECEMBER 31st, 1936.

To the Chairman and Members of the Longbenton Urban District Council.

We beg to submit our Annual Report for the year ending December 31st, 1936.

The live births notified during the year were 274 in number—149 males and 125 females—and were notified by:—

Doctors and Parents 40 District Nurses... ... 234

274 Births.

The still births notified during the year were 4 in number, and were notified by :—

Doctors 2 Nurses

4 Still Births.

Births visited (first visits) 250 Re-visits to babies under 1 year of age ... 2897 Children visited (between 1 and 5 years of age) 3791 Visits to expectant mothers 308

Child Welfare Centres.—There are five Centres now under this Council. Dudley and Forest Hall Centres are open every Tuesday, and the Doctor attends fortnightly.

Burradon, Scaton Burn and West Allotment Centres are open fortnightly on Wednesday afternoons. The Doctor attends once a month.

The total number of attendances at the five Centres during the year was 3992.

The number of attendances by children under 1 year of age was 2531. By children between 1 and 5 years 1461.

240 children under 1 year of age attended at the Centres for the first time during 1936, and 80 children between the ages of 1 and 5 years attended for the first time.

THE ANTE-NATAL CLINICS are two in number—one at Dudley, and one at Forest Hall.

Dudley Clinic is open on the second Wednesday in each month, and Forest Hall Clinic on the second Thursday in each month.

133 expectant mothers attended during the year. The total number of attendances was 292.

THE SUPPLY OF MILK AND FOOD.—Fresh milk is supplied free to expectant and nursing mothers on the recommendation of the Medical Officer in cases where the income is below the scale fixed by the Council.

DRIED MILK, VIROL AND NUMOL.—4889 cartons of dried milk, 383 cartons of virol, and 260 cartons of numol were sold at cost price during the year, and also 61 bottles of cod liver oil. 3310 cartons of dried milk, 256 cartons of virol, and 176 of numol, were supplied free of cost for bottle fed babies and children under 3 years of age where the income was below the scale fixed by the Council.

CHILDREN ACT, 1908 (PART I).—Number of persons on the register who were receiving children for reward at the end of the year was 3.

The number of children was 3.

Yours faithfully,

L. HENDERSON,
K. M. HARVEY,

Health Visitors.



